

**ANNUAL EXPENDITURES FOR MEDICAL SERVICES  
BY MAJOR PROGRAM: FY 2005**

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Expenditure Category	All Medicaid Recipients	Recipients in MEDALLION I Program	Recipients in MEDALLION II Program	Recipients in Nursing Homes	Recipients in ICF-MR	Recipients in Elderly and Disabled Waiver	Recipients in AIDS Waiver	Recipients in Technology - Assisted Waiver	Recipients in Mental Retardation Waivers
<b>Total claim-based payments:</b>									
Inpatient Hospital	\$346,990,904	\$0	\$0	\$24,834,075	\$1,020,139	\$13,815,621	\$696,266	\$2,827,057	\$2,758,492
Outpatient Hospital	126,048,020	0	0	4,931,767	229,788	6,610,766	191,690	879,867	1,818,611
Nursing Facilities	634,449,446	0	0	631,791,163	519,169	148,731	0	2,237	20,892
Other Long-term Care	158,482,535	0	0	251,698	455	131,341,557	705,841	21,599,923	176,168
Mental Health									
DMHMRSAS Facilities	215,864,137	0	0	202,374,943	211,926,483	0	0	0	69,791
DMHMRSAS Community Programs	393,705,308	0	0	371,845	494,936	902,784	8,840	130,182	286,522,548
Non-State Mental Health Programs	166,280,141	0	0	29,821,515	98,535	331,043	8,568	1,025	753,478
Physicians	152,737,470	968,613	376,143	6,129,881	223,423	4,473,644	152,088	603,578	1,677,897
Prescribed Drugs	597,328,182	0	0	114,666,645	2,490,503	263,880	4,078	62,129	10,131
Managed Care									
Payments to HMOs	940,041,209	0	312,347,404	0	0	0	0	0	0
Management Fees to PCPs	2,306,322	0	0	0	0	0	0	0	0
All Other Services	179,240,682	60,837	3,198	8,867,130	176,925	17,414,743	557,488	5,048,073	5,667,678
<b>Subtotal of claims-based payments</b>	<b>3,913,474,355</b>	<b>1,029,450</b>	<b>312,726,745</b>	<b>1,024,040,662</b>	<b>217,180,356</b>	<b>175,302,769</b>	<b>2,324,859</b>	<b>31,154,071</b>	<b>299,475,686</b>
<b>Lump-sum payments on MMIS:</b>									
To Nursing Facilities	16,869,045	0	0	16,869,045	0	0	0	0	0
To DMHMRSAS Facilities	(109,484)	0	0	0	0	0	0	0	0
To ICF-MR-Community Facilities	4,581,500	0	0	0	4,581,500	0	0	0	0
To Private Mental Hospitals	4,203,423	0	0	17,622	0	3,458	35	104	11,967
To Inpatient Hospitals	168,694,507	0	0	12,073,435	495,955	6,716,658	338,500	1,374,414	1,341,080
To Enhanced Disproportionate Share	13,645,576	0	0	0	0	0	0	0	0
To Rehabilitation Agencies	888,710	0	0	30,622	0	54,591	84	18,683	90,849
To Rural Health Clinics	2,189,370	0	0	64,221	0	25,541	61	572	12,305
To Federally Qualified Health Centers	2,117,878	0	0	52,241	0	38,116	576	16	13,657
To Pharmacies	121,106	0	0	23,248	505	54	1	13	2
To Other Providers	29,144,009	0	0	0	0	0	0	0	0
<b>Subtotal of lump-sum payments</b>	<b>242,345,639</b>	<b>0</b>	<b>0</b>	<b>29,130,434</b>	<b>5,077,960</b>	<b>6,838,418</b>	<b>339,255</b>	<b>1,393,802</b>	<b>1,469,861</b>
<b>Non-MMIS Payments/Recoveries:</b>									
Inpatient Hospital	8,379,709	0	0	599,734	24,636	333,642	16,815	68,272	66,617
Enhanced Disproportionate Share	97,916,035	0	0	0	0	0	0	0	0
Medicare Premiums	133,111,555	0	0	N/A	N/A	N/A	N/A	N/A	N/A
Group Health Plan Payments (HIPPI)	3,959,700	0	0	0	0	0	0	0	0
Drug Rebates	(120,604,459)	0	0	(23,151,944)	(502,849)	(53,279)	(823)	(12,544)	(2,046)
Transportation	48,861,670	0	0	15,852,942	199,216	6,493,652	76,059	248,195	450,632
Other Payments/Recoveries	66,970,032	0	0	17,524,080	3,716,538	2,999,900	39,785	533,130	5,124,831
<b>Subtotal of non-MMIS payments</b>	<b>238,594,243</b>	<b>0</b>	<b>0</b>	<b>10,225,078</b>	<b>3,412,905</b>	<b>9,440,273</b>	<b>115,020</b>	<b>768,781</b>	<b>5,573,418</b>
Subtotal of Payments to Providers	4,394,414,237	1,029,450	312,726,745	1,063,396,174	225,671,221	191,581,460	2,779,135	33,316,653	306,518,965
Less: Enhanced Disproportionate Share	(111,561,611)	0	0	0	0	0	0	0	0
<b>Net Payments to Providers</b>	<b>\$4,282,852,626</b>	<b>\$1,029,450</b>	<b>\$312,726,745</b>	<b>\$1,063,396,174</b>	<b>\$225,671,221</b>	<b>\$191,581,460</b>	<b>\$2,779,135</b>	<b>\$33,316,653</b>	<b>\$306,518,965</b>
<b>Average monthly recipients</b>	<b>538,082</b>	<b>24,164</b>	<b>202,408</b>	<b>24,567</b>	<b>1,744</b>	<b>9,038</b>	<b>173</b>	<b>323</b>	<b>6,057</b>
<b>Average cost per recipient</b>	<b>\$7,959</b>	<b>\$43</b>	<b>\$1,545</b>	<b>\$43,286</b>	<b>\$129,423</b>	<b>\$21,197</b>	<b>\$16,057</b>	<b>\$103,307</b>	<b>\$50,602</b>
<b>Average monthly eligibles</b>	<b>617,378</b>								
<b>Average cost per eligible</b>	<b>\$6,937</b>								

Sources/Notes:

- (1) Claims payments from various SAS datasets.
- (2) Lump-sum payments from internal financial balancing reports and prorated to programs based upon claims payments
- (3) Non-MMIS payments/recoveries: DMAS Fiscal Unit reports.
- (4) Average monthly recipients from various SAS datasets.
- (5) Columns in this report are not mutually exclusive, therefore data within rows are not additive

File: compar-05.xls  
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